Filed
Date Filed: 06/18/2009
Business ID:
William M. Gardner
Secretary of State

State of New Hampshire

Filing fee: \$15.00 Use black print or type.

Form 1

APPLICATION FOR RESERVATION OF NAME FOR:

CORPORATION, LIMITED LIABILITY COMPANY, REGISTERED LIMITED LIABILITY PARTNERSHIP, LIMITED PARTNERSHIP OR NEW HAMPSHIRE INVESTMENT TRUST

THE UNDERSIGNED APPLIES FOR RESERVATION OF THE FOLLOWING NAME FOR A PERIOD OF ONE HUNDRED TWENTY DAYS:

1) Application for Reservation of Name for:	
Media Profes	ssionals, Inc
2) Name Being Reserved Under (please check one bo	ox only):
RSA 293-A:4.02 — Corporation under RSA 293-A: "incorporated", "limited" or the abbreviation "corp.", "another language.	4.01 requires the name shall contain the word "corporation", inc.", or "ltd." or words or abbreviations of like import in
RSA 304-C:4 - Limited Liability Company under R liability company" or the abbreviation "L.L.C." or sim	SA 304-C:3 requires the name shall contain the words "limited ilar abbreviation.
RSA 304-A:46 - NEW HAMPSHIRE Limited Lia contain the words "limited liability partnership" or the its name.	ability Partnership under RSA 304-A:45 requires the name shall abbreviation "L.L.P." or "LLP" as the last words or letters of
words "limited liability partnership", "registered limite	nership under RSA 304-A:50 requires the name must contain the d liability partnership" or "professional limited liabilityL.P.", "P.L.L.P", "P.L.L." or "PLL" as the last
RSA 304-B:3 - Limited Partnership under RSA 304 words "limited partnership" as the last words of its na	I-B:2 requires the name shall contain without abbreviation the me.
RSA 293-B:16 II & III - New Hampshire Investm	nent Trust under RSA 293-B:16.
3) Nature of Business (Required):	
Media - Marketing Services	
4) APPLICANT INFORMATION:	
Cleveland, Waters and Bass, P.A.	
(Print Name	of Applicant)
Two Capital Plaza, P.O. Box 1137, Concord, NH 03302	2-1137
(No.) (Street)	(City/Town) (State) (Zip Code)
Muura EVI (ascotto	Paralegal
(Authorized Signature)	(Title)
Monica E. Marcotte	marcottem@cwbpa.com
(Print or type name)	(Email address)
Date signed: June 18, 2009	(603) 224-7761
Dute signed:	(Phone number)
DISCLAIMER: All documents filed with the Corpor	rate Division become public records and will be
available for public inspection in either tangible or	
artanable for paorie inspection in crimer images	State of New Hampshire
Mail fee with DATED AND SIGNED ORIGINA	Form 1 - Reservation of Name 1 Page(s)
North Main Street, Concord NH 03301-4989.	T0916931003